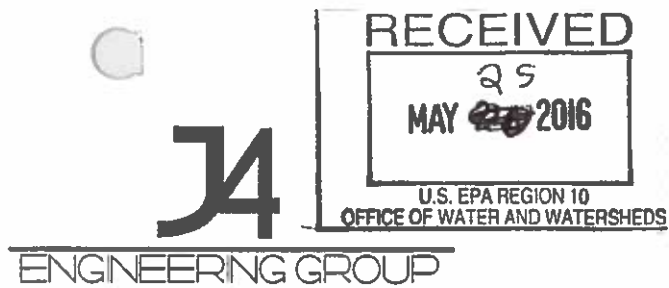


C-4

J4 Engineering Group LLC
333 W. Rossi St., Suite 300
Boise, ID 83706
Tel 208-342-9885
www.j4eng.com



May 18th, 2016

US EPA Region 10
Attn: NPDES Permits Unit Manager
1200 Sixth Avenue, Suite 900, OWW-191
Seattle, WA 98101

Re: ID0028371: Operation and Maintenance Plan Notification

To whom it may concern:

This letter is provided as notification that an Operation and Maintenance Plan has been developed and implemented for the Avimor Water Reclamation Facility. The plan has been onsite since March of 2008 and is available to EPA upon request.

Please feel free to contact me if you have any questions or need additional information. I can be reached at 208-342-9885 or by email at jreed@j4eng.com.

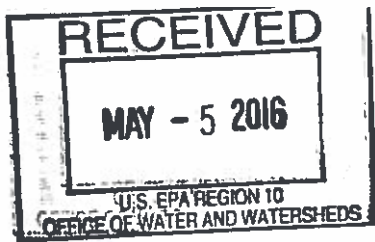
Respectfully,

A handwritten signature in blue ink that reads 'Josh Reed'.

Joshua Reed, P.E.
J4 Engineering Group

ICIS
JRE 5/26/16

J4 Engineering Group LLC
333 W. Rossi St., Suite 300
Boise, ID 83706
Tel 208-342-9885
www.j4eng.com



J4
ENGINEERING GROUP

April 29th, 2016

US EPA Region 10
Attn: NPDES Permits Unit Manager
1200 Sixth Avenue, Suite 900, OWW-191
Seattle, WA 98101

Re: **ID0028371**: QAP Notification

To whom it may concern:

This letter is provided as notification that a Quality Assurance Plan has been developed and implemented for the Avimor Water Reclamation Facility. The plan is on site and available to EPA upon request.

Please feel free to contact me if you have any questions or need additional information. I can be reached at 208-342-9885 or by email at jreed@j4eng.com.

Respectfully,

Joshua Reed, P.E.
J4 Engineering Group

1615 5/6/16 JR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2010-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: AVIMOR WATER RECLAMATION FACILITY

ADDRESS: APPROXIMATELY 10 MILES NORTH OF EAGLE IDAHO
EAGLE, ID 83703

FACILITY: AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCT

LOCATION: STATE HIGHWAY 55, 6.8 MILES NE OF EAGLE
EAGLE, ID 83703

ATTN: BRAD R. PFANNMULLER William E Duncan

ID0028371	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2016	05/31/2016

DMR Mailing ZIP CODE: 83714
MINOR

MAY 23 2016

Spring Valley Creek
Receiving Water (Ambient)

U.S. EPA REGION 10
Office of Compliance and Enforcement

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, total [as N]	SAMPLE MEASUREMENT	*****	*****	*****	*****	No Discharge	*****		0		
00600 P O See Comments	PERMIT REQUIREMENT	*****	*****	*****	*****	15 MO AVG	*****	mg/L		Weekly	COMP24
Nitrogen, ammonia total [as N]	SAMPLE MEASUREMENT	No Discharge			*****	No Discharge			0		
00610 P O See Comments	PERMIT REQUIREMENT	8 MO AVG	17 DAILY MX	lb/d	*****	2.4 MO AVG	4.7 DAILY MX	mg/L		Two Days per Week	COMP24
Phosphorus, total [as P]	SAMPLE MEASUREMENT	No Discharge				No Discharge			0		
00665 P O See Comments	PERMIT REQUIREMENT	1.2 MO AVG	Req. Mon. DAILY MX	lb/d	Req. Mon. MO AVG	Req. Mon. WKLY AVG	Req. Mon. DAILY MX	mg/L		Weekly	COMP24
E. coli, MTEC- MF	SAMPLE MEASUREMENT	*****	*****	*****	*****	No Discharge			0		
31648 1 O Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	126 MO GEOMN	406 INST MAX	#/100L		Five per Month	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	No Discharge			*****	*****	*****	*****	0		
50050 1 O Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	MGD	*****	*****	*****	*****		Continuous	Recorder (auto)
Chlorine, total residual	SAMPLE MEASUREMENT	No Discharge			*****	No Discharge			0		
50060 1 O Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	lb/d	*****	50 MO AVG	50 DAILY MX	ug/L		Five Days per Week	GRAB
BOD, 5- day, percent removal	SAMPLE MEASUREMENT	*****	*****	*****	*****	No Discharge	*****		0		
81010 K O Percent Removal	PERMIT REQUIREMENT	*****	*****	*****	85 MO AV MN	*****	*****	%		Monthly	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
DAN Richter President		[Signature]	208-860-5075	05/19/2016
TYPED OR PRINTED			AREA Code NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Discharge Oct 1- March 31 only; O= Effluent; full narrative description in Permit Part I.B.3; P= Effluent, for months with no discharge, sample once per month; Q= Effluent, report 7- day running average of daily inst max, max daily avg, mo inst max; Permit Part I.B.10

1113 5/24/16 JR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if
NAME: AVIMOR WATER RECLAMATION FACILITY
ADDRESS: APPROXIMATELY 10 MILES NORTH OF EAGLE IDAHO
EAGLE, ID 83703

FACILITY: AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCT
LOCATION: STATE HIGHWAY 55, 6.8 MILES NE OF EAGLE
EAGLE, ID 83703

ATTN: BRAD R. PFANNMULLER *William E DUNCAN*

ID0028371	001- A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2016	05/31/2016

DMR Mailing ZIP CODE: 83714
MINOR

MAY 23 2016

Spring Valley Creek
Receiving Water (Ambient)

U.S. EPA REGION 10
Office of Compliance Enforcement

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. centigrade	SAMPLE MEASUREMENT	*****	*****	*****	<i>No Discharge</i>				0		
00010 Q 0 See Comments	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MX 7D AV	Req. Mon. MX DA AV	Req. Mon. INST MAX	deg C		Continuous	Recorder (auto)
Oxygen, dissolved [DO]	SAMPLE MEASUREMENT	*****	*****	*****	<i>No Discharge</i>				0		
00300 I 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. INST MIN	Req. Mon. MO AVG	*****	mg/L		Twice per Month	GRAB
BOD, 5- day, 20 deg. C	SAMPLE MEASUREMENT	*****	*****	*****	<i>No Discharge</i>				0		
00310 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	*****	mg/L		Twice per Week	COMP24
BOD, 5- day, 20 deg. C	SAMPLE MEASUREMENT	<i>No Discharge</i>			*****	<i>No Discharge</i>			0		
00310 P 0 See Comments	PERMIT REQUIREMENT	52 MO AVG	87 WKLY AVG	lb/d	*****	15 MO AVG	25 WKLY AVG	mg/L		Twice per Week	COMP24
pH	SAMPLE MEASUREMENT	*****	*****	*****	<i>No Discharge</i>				0		
00400 I 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 INST MIN	*****	9 INST MAX	SU		Five Days per Week	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	<i>No Discharge</i>				0		
00530 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	*****	mg/L		Twice per Week	COMP24
Solids, total suspended	SAMPLE MEASUREMENT	<i>No Discharge</i>			*****	<i>No Discharge</i>			0		
00530 P 0 See Comments	PERMIT REQUIREMENT	35 MO AVG	59 WKLY AVG	lb/d	*****	10 MO AVG	17 WKLY AVG	mg/L		Twice per Week	COMP24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE	DATE
<i>DAN RICHTER</i> <i>PRESIDENT</i>	<i>[Signature]</i>	208-860-5075	05/19/2016
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER
			MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Discharge Oct 1- March 31 only; O= Effluent; full narrative description in Permit Part I.B.3; P= Effluent, for months with no discharge, sample once per month; Q= Effluent, report 7- day running average of daily inst max, max daily avg, mo inst max; Permit Part I.B.10

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if

NAME: AVIMOR WATER RECLAMATION FACILITY

ADDRESS: APPROXIMATELY 10 MILES NORTH OF EAGLE IDAHO
EAGLE, ID 83703

FACILITY: AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCT

LOCATION: STATE HIGHWAY 55, 6.8 MILES NE OF EAGLE
EAGLE, ID 83703

ATTN: BRAD R. PEANMULLER William E Duncan

ID0028371	001- A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/01/2016	05/31/2016

Form Approved
EPA No. 3320-1040-0004

RECEIVED


DMR Mailing ZIP CODE: 83714
MINOR

MAY 23 2016

Spring Valley Creek
Receiving Water (Ambient)

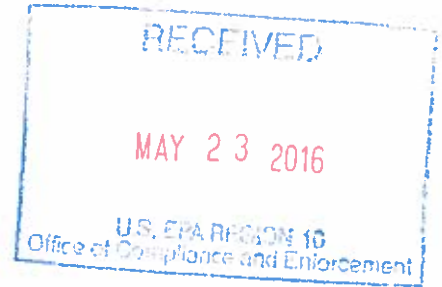
U.S. EPA REGION 10
Office of Compliance ☒ No Discharge Payment

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, suspended percent removal	SAMPLE MEASUREMENT	*****	*****	*****	NO DISCHARGE				0		
81011 K O Percent Removal	PERMIT REQUIREMENT	*****	*****	*****	85 MO AV MN	*****	*****	%		Monthly	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
DAN RICHTER PRESIDENT TYPED OR PRINTED			208-460-5075	05/19/2016	
			AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Discharge Oct 1- March 31 only; O= Effluent; full narrative description in Permit Part I.B.3; P= Effluent, for months with no discharge, sample once per month; Q= Effluent, report 7- day running average of daily inst max, max daily avg, mo inst max; Permit Part I.B.10



May 18, 2016

Director of the Office of Compliance and Enforcement
US EPA Region 10
1200 Sixth Ave., Suite 900 OCE-101
Seattle, Washington 98101-3140

RE: Change to Signatory Authorization / NPDES Permit ID0028371

Dear EPA Personnel:

In accordance with NPDES Permit ID0028371, Section E.2.b, this letter is to notify your office of a change in signatory authorization. As President of the Avimor Water Reclamation Company, I am authorizing William E. Duncan to sign the discharge monitoring report on behalf of the Avimor Water Reclamation Co. Mr. Duncan is responsible for the operation and compliance of the reclamation facility.

Respectfully,

A handwritten signature in blue ink, appearing to read "Dan Richter", with a long horizontal line extending to the right.

Dan Richter
President
Avimor Water Reclamation Co.
18454 N. McLeod Way
Boise, Idaho 83714

Cc: Idaho department of
Environmental Quality
1445 North Orchard
Boise, Idaho 83706

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if
NAME: AVIMOR WATER RECLAMATION FACILITY
ADDRESS: APPROXIMATELY 10 MILES NORTH OF EAGLE IDAHO
EAGLE, ID 83703

FACILITY: AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCT
LOCATION: STATE HIGHWAY 55, 6.8 MILES NE OF EAGLE
EAGLE, ID 83703

ATTN: BRAD R. PFANNMULLER William E Duncan

ID0028371	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2016	06/30/2016

DMR Mailing ZIP CODE: 83714
MINOR

JUL 12 2016

Spring Valley Creek

Receiving Water (Ambient) REGION 10
Office of Compliance No Discharge Document

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. centigrade	SAMPLE MEASUREMENT	*****	*****	*****	NO	Discharge			0		
00010 Q 0 See Comments	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MX 7D AV	Req. Mon. MX DA AV	Req. Mon. INST MAX	deg C	.	Continuous	Recorder (auto)
Oxygen, dissolved [DO]	SAMPLE MEASUREMENT	*****	*****	*****	NO	Discharge			0		
00300 I 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. INST MIN	Req. Mon. MO AVG	*****	mg/L		Twice per Month	GRAB
BOD, 5- day, 20 deg. C	SAMPLE MEASUREMENT	*****	*****	*****	NO	Discharge			0		
00310 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	*****	mg/L		Twice per Week	COMP24
BOD, 5- day, 20 deg. C	SAMPLE MEASUREMENT	NO Discharge			*****	NO Discharge			0		
00310 P 0 See Comments	PERMIT REQUIREMENT	52 MO AVG	87 WKLY AVG	lb/d	*****	15 MO AVG	25 WKLY AVG	mg/L		Twice per Week	COMP24
pH	SAMPLE MEASUREMENT	*****	*****	*****	NO Discharge				0		
00400 I 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 INST MIN	*****	9 INST MAX	SU		Five Days per Week	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	NO Discharge			0		
00530 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	*****	mg/L		Twice per Week	COMP24
Solids, total suspended	SAMPLE MEASUREMENT	NO Discharge			*****	NO Discharge			0		
00530 P 0 See Comments	PERMIT REQUIREMENT	35 MO AVG	59 WKLY AVG	lb/d	*****	10 MO AVG	17 WKLY AVG	mg/L		Twice per Week	COMP24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE	DATE
DAVID RICHTER President TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	208-860-5025 AREA Code NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Discharge Oct 1- March 31 only; O= Effluent; full narrative description in Permit Part I.B.3; P= Effluent, for months with no discharge, sample once per month; Q= Effluent, report 7- day running average of daily inst max, max daily avg, no inst max; Permit Part I.B.10

1415 7/15/16 JW

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2010-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if
NAME: AVIMOR WATER RECLAMATION FACILITY
ADDRESS: APPROXIMATELY 10 MILES NORTH OF EAGLE IDAHO
EAGLE, ID 83703

FACILITY: AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCT
LOCATION: STATE HIGHWAY 55, 6.8 MILES NE OF EAGLE
EAGLE, ID 83703

ATTN: BRAD R. PEARMILLER William E Duncan

ID0028371	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2016	06/30/2016


DMR Mailing ZIP CODE: 83714
MINOR

Spring Valley Creek
Receiving Water (Ambient)

U.S. EPA REGION 10
Office of Compliance and Enforcement

JUL 12 2016

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, total [as N]	SAMPLE MEASUREMENT	*****	*****	*****	*****	No Discharge			0		
00600 P O See Comments	PERMIT REQUIREMENT	*****	*****	*****	*****	15 MO AVG	*****	mg/L		Weekly	COMP24
Nitrogen, ammonia total [as N]	SAMPLE MEASUREMENT	No Discharge			*****	No Discharge			0		
00610 P O See Comments	PERMIT REQUIREMENT	8 MO AVG	17 DAILY MX	lb/d	*****	2.4 MO AVG	4.7 DAILY MX	mg/L		Two Days per Week	COMP24
Phosphorus, total [as P]	SAMPLE MEASUREMENT	No Discharge				No Discharge			0		
00665 P O See Comments	PERMIT REQUIREMENT	1.2 MO AVG	Req. Mon. DAILY MX	lb/d	Req. Mon. MO AVG	Req. Mon. WKLY AVG	Req. Mon. DAILY MX	mg/L		Weekly	COMP24
E. coli, MTEC- MF	SAMPLE MEASUREMENT	*****	*****	*****	*****	No Discharge			0		
31648 1 O Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	126 MO GEOMN	406 INST MAX	#/100L		Five per Month	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	No Discharge			*****	*****	*****	*****	0		
50050 1 O Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	MGD	*****	*****	*****	*****	0	Continuous	Recorder (auto)
Chlorine, total residual	SAMPLE MEASUREMENT	No Discharge			*****	No Discharge			0		
50060 1 O Effluent Gross	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	lb/d	*****	50 MO AVG	50 DAILY MX	ug/L		Five Days per Week	GRAB
BOD, 5- day, percent removal	SAMPLE MEASUREMENT	*****	*****	*****	No Discharge		*****		0		
81010 K O Percent Removal	PERMIT REQUIREMENT	*****	*****	*****	85 MO AV MN	*****	*****	%		Monthly	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
DAN Richter President TYPED OR PRINTED			208-860-5075	07/06/2016
			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Discharge Oct 1- March 31 only; O= Effluent; full narrative description in Permit Part I.B.3; P= Effluent, for months with no discharge, sample once per month; Q= Effluent, report 7- day running average of daily inst max, max daily avg, mo inst max; Permit Part I.B.10

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if
NAME: AVIMOR WATER RECLAMATION FACILITY
ADDRESS: APPROXIMATELY 10 MILES NORTH OF EAGLE IDAHO
EAGLE, ID 83703

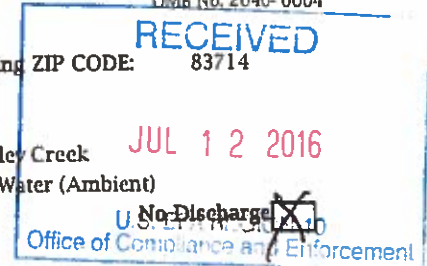
FACILITY: AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCT
LOCATION: STATE HIGHWAY 55, 6.8 MILES NE OF EAGLE
EAGLE, ID 83703

ATTN: BRAD R. PFANNMUELLER William E Duncan


ID0028371	001- A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
06/01/2016	06/30/2016

DMR Mailing ZIP CODE: 83714
MINOR

Spring Valley Creek
Receiving Water (Ambient)



PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, suspended percent removal	SAMPLE MEASUREMENT	*****	*****	*****	No Discharge				0		
81011 K O Percent Removal	PERMIT REQUIREMENT	*****	*****	*****	85 MO AV MN	*****	*****	%		Monthly	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
TYPED OR PRINTED			208-860-5075	07/04/2016	
			AREA Code	NUMBER	MM/DD/YYYY

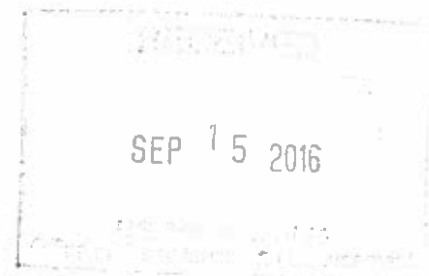
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Discharge Oct 1- March 31 only; O= Effluent; full narrative description in Permit Part I.B.3; P= Effluent, for months with no discharge, sample once per month; Q= Effluent, report 7- day running average of daily inst max, max daily avg, mo inst max; Permit Part I.B.10

A. Signatory Authority Information

The Signatory Authority is the individual that intends to sign DMRs and signs this Subscriber Agreement in Section F.

User Name: Avimor2016
Subscriber Name: William Duncan
Organization: OMCS LLC
Email Address: omcsllc@yahoo.com
Phone Number: 208-860-5075



B. Permit Information

Signing privileges are requested for the following permits:

Permit ID	Facility Name	Facility Address	Relationship	Authorized By
ID0028371	AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCTION SITE	STATE HIGHWAY 55, 6.8 MILES NE OF EAGLE AVIMOR VILLAGE 1 PHASE 1 CONSTRUCTION SITE EAGLE, ID 83703	Facility	Dan Richter

This request is (check one):

- ☒ **NEW:** a new user request by this facility to use NetDMR reporting
- ☐ **REQUEST FOR REACTIVATION:** a User ID re-activation of NetDMR reporting for a facility that had discontinued using NetDMR
- ☐ **CONTINUATION WITH NEW AUTHORIZATION:** an updated Subscriber Agreement submitted because a new Responsible Official and/or Signatory Authority has been identified at the facility
- ☐ **RENEWAL:** an updated form submitted when a permit application is submitted
Permit ID(s): _____
- ☐ **INACTIVATION:** Explain reason for inactivation in the box below and identify whether the inactivation is temporary or permanent
Permit ID(s): _____

Notes to Permitting Authority (Optional unless Inactivating):

C. Terms and Conditions

- PURPOSE:** This agreement creates a legally binding obligation for the signer of the Agreement (the Responsible Official and/or Signatory Authority) to abide by the terms and conditions for use of the NetDMR System, and memorializes a mutual understanding that the signer of this

agreement is as legally bound, obligated, and responsible by use of the assigned electronic signature as by a hand-written signature.

- **ACCEPTANCE & EFFECT:** Acceptance of this agreement by the Regulatory Authority shall be evidenced by notice from the Regulatory Authority, provided electronically, that this agreement has been approved.
- **SUBMITTAL & RECEIPT:** A Document shall be deemed to have been submitted when it is accessible to the Regulatory Authority. A document shall be deemed to have been received when it can be fully processed. No document shall satisfy any reporting requirement until it is received.
- **VERIFICATION:** In accordance with the associated certification statement, the signer of the Agreement is responsible for the truth and accuracy of the content of each submission. The signer of the Agreement also has an affirmative obligation to check the accuracy of the document as received by the Regulatory Authority and to notify the Regulatory Authority promptly if the document was sent without authorization or differs in substance in any way from the document that was submitted.
- **INABILITY TO TRANSMIT OR FILE REPORTS ELECTRONICALLY:** No party shall be liable for any failure to perform its obligations in connection with any Electronic Transaction or any Electronic Document, where such failure results from any act or cause beyond such party's control which prevents such party from electronically transmitting or receiving any Documents, except that the signer of the Agreement (Responsible Official and/or Signatory Authority) is nonetheless required to submit records or information required by law via other means, as provided by applicable law and within the time period provided by such law.
- **SEVERABILITY:** Any provision of the Agreement which is determined to be invalid or unenforceable will be ineffective to the extent of such determination without invalidating the remaining provisions of this Agreement or affecting the validity or enforceability of such remaining provisions.
- **TERMINATION AND RENEWAL:** The Agreement may be terminated at any time by the Regulatory Authority. Upon termination of this agreement, the associated ability to submit electronic information through the NetDMR system will be terminated. The Regulatory Authority will provide notification of termination, including the date on which termination takes effect. A new Responsible Official and/or Signatory Authority must resubmit this form at the time that a new permit application is submitted or when Responsible Official and/or Signatory Authority responsibility transfers from one person to another.
-Note: Termination of this agreement may eliminate the ability to comply with permit requirements for any continuing operations. Paper DMR Reports will only be accepted under this permit where the permittee has provided sufficient justification and obtained prior approval from the Regulatory Authority.
- **GOVERNING LAW:** This Agreement shall be governed by and interpreted in accordance with 40 CFR §122 and 40 CFR §3.

- **AGREEMENT:**

1. I agree to protect the electronic signature device, consisting of my NetDMR system user name and password, from use by anyone except me. Specifically, I agree to maintain the secrecy of my password and security- and challenge-question answers; I will not divulge or delegate my user name and password to any other individual; I will not write or save my password or challenge question/answer pairs to a script or other mechanism that allows its use or application by someone other than me;
2. I agree to contact the Regulatory Authority EPA Region 10 - Idaho at 206-553-0705 or R10NetDMR@epa.gov within 24 hours if any of the following occurs:
 - suspicion or determination that my user name, password, security question answer, or challenge question answers may have been lost, stolen or otherwise compromised;
 - receipt of an e-mail notification for any activity that I do not believe that I performed;
 - if, after receipt of COR, there is any evidence of discrepancy between any electronic document I have signed and submitted and what the NetDMR system has received from me;
 - if I do not receive an e-mail notification within 24 hours for any submission electronically signed using my credentials; or
 - if I cease to represent the regulated entity specified above as signatory of that organization's electronic submissions.
3. I understand and agree that I will be held as legally bound, obligated, and responsible for the use of my electronic signature as I would be using my hand-written signature;
4. I understand that I will be informed through my registered electronic mail (e-mail) address whenever my user name, password, or challenge question/answer pairs have been modified;
5. I agree to provide and maintain an email address by which to receive communications from the NetDMR system. I understand that this account must be accessible only by me and that I have an affirmative obligation to check this email account regularly. If any email sent to me by the NetDMR system is returned as undeliverable, I will explain why this occurred when requested by the EPA Region 10 - Idaho;
6. I understand that the NetDMR system reports the last date my user name and password were used immediately after successfully logging in to the system;
7. I understand that whenever I electronically sign and submit an electronic document to the NetDMR system, I will receive an e-mail at my registered e-mail address; This e-mail will inform me that a submission has been made to the system from my user account and will contain instructions to view information regarding the submission, including the Copy of Record (COR) for the submission; and
8. I agree to retain a copy of this signed agreement as long as I continue to represent the regulated entity specified above as signatory of the company's electronic submissions.

D. Inactivation/Removal

Permittee must indicate reason for inactivation in Section B of the form. This is done to inform the Regulatory Authority whether the permittee is no longer in business or has a temporary reason for inactivation.

E. Responsible Official Authorization

The Responsible Official is the appropriate individual identified under 40 CFR §122.22(a) with the authority to sign permit applications, reports, and other permit-required submittals (e.g., DMRs). The Responsible Official can also delegate the authority to electronically sign DMRs to a duly authorized representative(s) as described in 40 CFR §122.22(b).

Permit ID(s): ID0028371

I, Dan Richter President, have the authority to enter into this Agreement for AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCTION SITE and Permit ID ID0028371 under the applicable standards. I request EPA Region 10 - Idaho grant William Duncan the ability to submit DMRs for Permit ID ID0028371.



Responsible Official Signature

Dan Richter
President

Title

9-7-16

Date

F. Signatory Authority Signature

The Signatory Authority is the NetDMR user that submits this agreement to request approval to electronically sign DMRs. The Signatory Authority has the authority to sign DMRs under 40 CFR §122.22(a) or is a duly authorized representative(s) who has been delegated the authority to electronically sign DMRs by the Responsible Official as described in 40 CFR §122.22(b).

Permit ID: ID0028371

I, William Duncan, am authorized by the signatory authority named in Part E of this document, who does have the authority under the applicable standards, to enter into this agreement for AVIMOR LLC - AVIMOR VILLAGE 1 PHASE 1 CONSTRUCTION SITE and Permit ID ID0028371.

By submitting this application for ID0028371, I, William Duncan, have read, understand, and accept the terms and conditions of this subscriber agreement. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.



Signatory Authority Signature

omcs llc
member

Title

9-7-16

Date

Print this form, save a copy for your records, and mail to:

EPA Region 10 - Idaho

Attn: Sharon Eng MS OCE-101

EPA Region 10

1200 6th Avenue, Suite 900

Seattle, WA 98101

Checklist - Regulatory Authority Use Only:

Check	Information	Name	Date
✓	Form Received by	JK	9/16/16
↓	Verified ICIS-NPDES Permit Limits	↓	↓
↓	Regulatory Authority Approves NetDMR Authorization	↓	↓
↓	ICIS-NPDES NetDMR Flag Populated	↓	↓
↓	User Approved in NetDMR Application	↓	↓
↓	Notification to User	↓	↓
	Inactivated?		

April 7, 2017

Director of the Office of Compliance and Enforcement
US EPA Region 10
1200 Sixth Ave., Suite 900 OCE-101
Seattle, Washington 989101-3140

APR 11 2017

RE: Avimor Water Reclamation Facility SSO

Dear EPA Personnel,

In accordance NPDES Permit No. ID0028371 Section IV.G.2 Noncompliance Reporting, the following information is a written submission of a sanitary sewer overflow that occurred on April 1st, 2017 at 2200 hours at the Avimor Water Reclamation Facility in Eagle, ID.

Description:

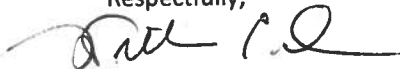
After a significant wet weather event that occurred on March 30th, 2017, storage capacity in our influent wet well and equalization basin were diminished. On April 1, 2017, a gas-powered trash pump was used to transfer raw sewage into two offline basins to make room for more flow and mitigate an overflow of the influent wet well. Pump was checked at 2200 hours, at 2220 hours the transfer hose was found outside of the basin it had been pumping into. Pumping was immediately stopped and the discharge hose was relocated back into the basin. Duration of the discharge was 20 minutes with an estimate of approximately 3000 gallons discharged. The majority of the overflow was contained within the direct facility grounds, while a small portion flowed into a containment swale adjacent to the facility. After a facility and adjacent grounds walk through, it was determined that no raw sewage entered any receiving waters of the United States. No people came into contact with or during the sanitary sewer overflow.

Noncompliance Mitigation Efforts:

In the future, to mitigate this type of sanitary sewer overflow, the following steps will be taken:

- During any event that involves manual transfer of raw sewage, all hoses and equipment will be secured to ensure that flows are directed only where intended.
- A follow up meeting will be conducted to inform all personnel of the incident, impacts, and procedures to mitigate future sanitary sewer overflow incidents.

Respectfully,



William E. Duncan
OMCS, LLC
2976 E State Street
Ste. 120, PMB #405
Eagle, Idaho 83616

Cc: Idaho Department of Environmental Quality
1445 N. Orchard
Boise, Idaho 83706

NPDES 24hr Non-Compliance Report - Call Summary

Call Received By

Jason Rodriguez

Date of Call

4/2/2017

Time of Call

3:15 PM

NonComp Date

4/1/2017

Sector

Muni

Print Current
Form

Mail Today's
Report

Open Query

Caller Name

Jay Irby

Caller Phone #

Unknown

Facility Name

Avimor

Permit ID

ID0028371

NonCompliance Type

CSO/SSO

Violation
Description

SSO of approx. 3000 gal on site at facility.

Comments

Form ID

1620

Entry Qtr

2017 Q2

Entry Date

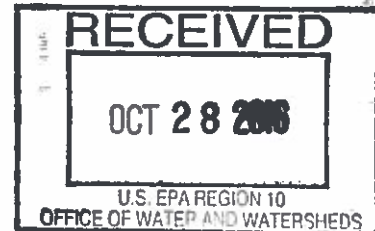
4/4/2017

J4 Engineering Group LLC
333 W. Rossi St., Suite 300
Boise, ID 83706
Tel 208-342-9885
www.j4eng.com



October 24, 2016

US EPA Region 10
Attn: NPDES Permits Unit Manager
1200 Sixth Avenue, Suite 900, OWW-191
Seattle, WA 98101



Re: ID0028371: Emergency Response and Public Notification Plan

To whom it may concern:

This letter is provided as notification that an Operation and Maintenance Plan has been updated to include the emergency response and public notification plan and has been implemented for the Avimor Water Reclamation Facility. The updated plan is onsite and is available to EPA upon request.

Please feel free to contact me if you have any questions or need additional information. I can be reached at 208-342-9885 or by email at jreed@j4eng.com.

Respectfully,

A handwritten signature in blue ink that reads 'Josh Reed'.

Joshua Reed, P.E.
J4 Engineering Group

CLIS 11/7/16 JR